PTO/SB/21 (09-04)

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FRANSMITTAL		-	Filing Date	10/774,650		
FEB 2 0 2007 E FORM		<u>L</u>	First Named Inventor	02/06/2004		
		L	Art Unit	Isamu Okabe et al.		
			Examiner Name	3682		
This peased for all correspondence after initial filing)				M. Charles		
	ges in This Submission	99	Attorney Docket Number	TWA98US	Α	
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Firm Name Howson & Howson LLP						
Signature Juny Alma						
Printed name George A. Smith, Jr.						
Date 02/15/2007			Reg. No. 24,442			
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PTO/SB/17 (01-06)

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Under the Pa no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known opriations Act, 2005 (H.R. 4818). **Application Number** 10/774,650 TRANSMITTA Filing Date 02/06/2004 For FY 2006 First Named Inventor Isamu Okabe et al. **Examiner Name** M. Charles Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3682 TOTAL AMOUNT OF PAYMENT 130.00 TWA98USA Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card Check Money Order None Other (please identify): Deposit Account Deposit Account Number: 08-3040 Deposit Account Name: 08-3040 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Smail Entity **Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) <u>Fee (\$)</u> Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 160 150 80 Reissue 300 150 500 600 250 300 Provisional 200 100 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee Paid (\$) **Multiple Dependent Claims** - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Extra Claims indep. Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Total Sheets Extra Sheets Fee Paid (\$) Fee (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Disclaimer Fee **\$130.00** SUBMITTED BY Registration No. 24,442 Signature Telephone 215-540-9200 Name (Print/Type) Date 02/15/2007 A Smith Jr

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